

County: Barron  
RICE LAKE CONVALESCENT CENTER  
1016 LAKESHORE DRIVE

Facility ID: 7540

Page 1

RICE LAKE 54868 Phone: (715) 234-9101  
Operated from 1/1 To 12/31 Days of Operation: 365  
Operate in Conjunction with Hospital? No  
Number of Beds Set Up and Staffed (12/31/01): 90  
Total Licensed Bed Capacity (12/31/01): 98  
Number of Residents on 12/31/01: 78

Ownership:  
Highest Level License:  
Operate in Conjunction with CBRF? No  
Title 18 (Medicare) Certified? Yes  
Title 19 (Medicaid) Certified? Yes  
Average Daily Census: 81

\*\*\*\*\*

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		46.2
Supp. Home Care-Personal Care	No					1 - 4 Years		37.2
Supp. Home Care-Household Services	No	Developmental Disabilities	2.6	Under 65	2.6	More Than 4 Years		16.7
Day Services	No	Mental Illness (Org./Psy)	32.1	65 - 74	11.5			-----
Respite Care	No	Mental Illness (Other)	9.0	75 - 84	34.6			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	41.0	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	10.3	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.3		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	9.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	21.8	65 & Over	97.4	-----		
Transportation	No	Cerebrovascular	9.0		-----	RNs		10.8
Referral Service	No	Diabetes	1.3	Sex	%	LPNs		4.5
Other Services	No	Respiratory	7.7		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	6.4	Male	37.2	Aides, & Orderlies		
Mentally Ill	No		-----	Female	62.8			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

\*\*\*\*\*

#### Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Private Pay		Family Care		Managed Care		Total Resi - dents	% Of All
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	No.	%	No.	%	No.	%		
Int. Skilled Care	0	0.0	0	1	2.0	103	0	0.0	0	0.0	0	0.0	0	0.0	1	1.3
Skilled Care	5	100.0	292	43	86.0	88	3	100.0	191	18	90.0	108	0	0.0	69	88.5
Intermediate	---	---	---	6	12.0	74	0	0.0	0	2	10.0	98	0	0.0	8	10.3
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0.0
Total	5	100.0		50	100.0		3	100.0		20	100.0		0	0.0	78	100.0

\*\*\*\*\*

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	5.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	3.8	Bathing	0.0	92.3	7.7	78
Other Nursing Homes	1.9	Dressing	11.5	87.2	1.3	78
Acute Care Hospitals	86.3	Transferring	42.3	47.4	10.3	78
Psych. Hosp. -MR/DD Facilities	1.3	Toilet Use	25.6	61.5	12.8	78
Rehabilitation Hospitals	1.3	Eating	87.2	10.3	2.6	78
Other Locations	0.6	*****				
Total Number of Admissions	160	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	7.7	Receiving Respiratory Care		5.1
Private Home/No Home Health	20.3	Occ/Freq. Incontinent of Bladder	35.9	Receiving Tracheostomy Care		1.3
Private Home/With Home Health	18.4	Occ/Freq. Incontinent of Bowel	15.4	Receiving Suctioning		1.3
Other Nursing Homes	13.9			Receiving Ostomy Care		5.1
Acute Care Hospitals	13.3	Mobility		Receiving Tube Feeding		0.0
Psych. Hosp. -MR/DD Facilities	0.6	Physically Restrained	2.6	Receiving Mechanically Altered Diets		24.4
Rehabilitation Hospitals	0.0					
Other Locations	4.4	Skin Care		Other Resident Characteristics		
Deaths	29.1	With Pressure Sores	6.4	Have Advance Directives		85.9
Total Number of Discharges		With Rashes	19.2	Medications		
(Including Deaths)	158			Receiving Psychoactive Drugs		48.7

\*\*\*\*\*

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

\*\*\*\*\*

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	82.2	82.5	1.00	86.4	0.95	85.8	0.96	84.6	0.97
Current Residents from In-County	83.3	74.3	1.12	69.6	1.20	69.4	1.20	77.0	1.08
Admissions from In-County, Still Residing	20.0	19.8	1.01	19.9	1.01	23.1	0.86	20.8	0.96
Admissions/Average Daily Census	197.5	148.2	1.33	133.4	1.48	105.6	1.87	128.9	1.53
Discharges/Average Daily Census	195.1	146.6	1.33	132.0	1.48	105.9	1.84	130.0	1.50
Discharges To Private Residence/Average Daily Census	75.3	58.2	1.29	49.7	1.51	38.5	1.95	52.8	1.43
Residents Receiving Skilled Care	89.7	92.6	0.97	90.0	1.00	89.9	1.00	85.3	1.05
Residents Aged 65 and Older	97.4	95.1	1.03	94.7	1.03	93.3	1.04	87.5	1.11
Title 19 (Medicaid) Funded Residents	64.1	66.0	0.97	68.8	0.93	69.9	0.92	68.7	0.93
Private Pay Funded Residents	25.6	22.2	1.16	23.6	1.09	22.2	1.15	22.0	1.17
Developmentally Disabled Residents	2.6	0.8	3.42	1.0	2.47	0.8	3.42	7.6	0.34
Mentally Ill Residents	41.0	31.4	1.31	36.3	1.13	38.5	1.07	33.8	1.21
General Medical Service Residents	6.4	23.8	0.27	21.1	0.30	21.2	0.30	19.4	0.33
Impaired ADL (Mean)	36.9	46.9	0.79	47.1	0.78	46.4	0.80	49.3	0.75
Psychological Problems	48.7	47.2	1.03	49.5	0.98	52.6	0.93	51.9	0.94
Nursing Care Required (Mean)	7.9	6.7	1.18	6.7	1.16	7.4	1.05	7.3	1.07